



Abstract

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PI Title:

Project Title: Efficacy of Nurse Coaching to Aid Ambulatory Surgery Pt.

Abstract: *DESCRIPTION (provided by applicant): The restructuring of health care delivery within the United States has significantly impacted the management of illness including surgical intervention and recovery at home. The move toward ambulatory surgery has grown with predictions that 70 to 80 percent of all elective surgeries will be performed on an ambulatory basis by the year 2000. The specific aim of this project is to determine the effectiveness of a nurse coached (NC) intervention delivered by telephone on the first surgical evening, and at 24, 48 and 72 hours post arthroscopic surgery in 1) promoting cognitive and emotional processing, 2) relieving symptom distress, and 3) improving overall functional health status during recovery. Patients who receive the NC intervention by telephone, when compared to a group of comparable Controls, will have significantly better cognitive and emotional processing (H1), less symptom distress (H2) and improved overall functional health status (H3) at the measurement periods specified in the hypotheses. This randomized clinical trial will have two groups (NC vs. Controls) across 2 sites, with 225/site (113 in NC group; 112 in Controls) for a total of 450 patients. Data will be collected at three data points. Sample selection criteria include English speaking male and female participants of any ethnic group, 18 or more years of age, having ambulatory arthroscopic surgery at one of two clinical sites. Roy's Adaptation Model is the framework underpinning the study. The Nurse Coach will evaluate patients' health status, assess and monitor symptoms, evaluate treatments and clarify instructions. The comparable Control group will receive care normally given to patients in the hospitals and during follow-up recovery at home. Study instruments measuring outcome variables are: Cognitive Adaptive Process Scale (cognitive processing); Profile of Mood States (emotional processing); Symptom Distress Scale (symptom distress); and the MOS SF-36*

(functional health status). All tools have satisfactory empirical psychometric evidence. Study hypotheses will be tested with repeated measures multivariate analysis of variance (R-MANOVA) and repeated measures analysis of variance (R-ANOVA). The proposed study builds upon the Principal Investigator's previous research and will provide empirical evidence for nurse-managed care during recovery at home from ambulatory surgery.

Thesaurus Terms:

human therapy evaluation, nursing intervention, orthopedics, outpatient care, patient care management, rehabilitation

clinical trial, functional ability, home health care, postoperative state, telemedicine

human subject, patient oriented research, psychological test

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